

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AC</i>	535	05-31-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	6/7/03
1	6/11/03
2	6/11/03
3	6/11/03
4	6/11/03
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50	6/11/03

Claim	Date
Final Original	2/1/04
51	2/1/04
52	2/1/04
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96	2/1/04
97	2/1/04
98	2/1/04
99	2/1/04
100	2/1/04

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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